

LOUISIANA STATE BOARD OF PRACTICAL NURSE EXAMINERS
3421 NORTH CAUSEWAY BOULEVARD, SUITE 505
METAIRIE, LOUISIANA 70002-3715
(504) 838-5791
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CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7000 1670 0007 5539 1346

Theodise Collins
2623 Dawson Ave
Kenner, LA 70062

License #940827
D.O.B. 5/28/66

The matter of license #940827 came on for final action by the Louisiana State Board of Practical Nurse Examiners on the 13th day of March, 2004

FINDINGS OF FACT

On September 19, 2002 the Board received a letter (**Exhibit A**) from an LPN wanting to report the respondent for "medical malpractice." The writer states that the respondent (identified by name and place of employment, Colonial Oaks Living Center) works a Monday through Friday 3-11 shift and has 2 med passes during this time, one at 4-5 pm and another at 8-9 pm. It is alleged that the respondent gives her meds "for 8 & 9 o'clock along with her five o'clock med pass" and "it is easy to notice because she only brings the med cart out on the floor one time (for the five o'clock pass) and never brings the cart out again." The writer states that she has personally witnessed her do this on two occasions, putting the "residents health and welfare in jeopardy as she does this everyday." The writer also alleges that the son (name provided) of one resident pulled his mother out of the facility upon noticing this practice and "even went as far as to pretend to leave the facility and sneak back into his mother's room to see if this nurse would give his mother her meds, she never did." She claims the son reported this to the Louisiana State surveyors who visited the facility in July to follow the respondent on a night med pass and the respondent told them she had just finished.

The writer refers to the respondent as a manipulator who has befriended the Director of Nurses who refuses to investigate this matter even after the complaint was made to State. She also claims the respondent has befriended the CNAs on that shift and knows they will not report her. The residents in question are allegedly unable to speak or suffer with dementia and "are unable to speak up for themselves."

The writer asked that she remain anonymous because she works with the respondent and does not want to create a hostile work environment, but states that the matter can be easily investigated by visiting the facility around 7:30 - 8:00 pm and witnessing that residents scheduled to receive meds at 9 pm have already received them, or do not receive them at all. She also states that the son of a resident who witnessed this (mentioned earlier in this complaint) said he would inform the Board of what he has witnessed, but the writer provided his home and phone numbers should the Board want his statement.

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The writer asks that the Board investigate the matter so that the residents no longer are "paying the price with their health and well being compromised while the Director of Nurses and other staff members ignore this very serious matter." She concludes with, "To illustrate the boldness of her act, she even orientated a new employee and did only one med pass with him witnessing it."

On September 30, 2002 the Board sent the respondent a letter (**Exhibit B**) informing her of the allegations and requesting a narrative statement. On October 14, 2002 the Board received a response (**Exhibit C**). The respondent states, "As a very conscientious nurse I am aware of the importance of following the nursing standards set forth by the Louisiana State Board of Practical Nurse Examiners. I administer the resident's medication using the five rights of medication administration that I learned in school. If a medication is unable to be administered it is documented in the nurses notes and the MD is made aware as per facility policy. I have never had a family member or a staff member approach me on my ability to administer medication nor has my Director of Nurses, My ADON, or the nursing manager approached me. Also during our annual survey I was the nurse that was randomly audited and I received no deficiencies....I am sure after careful investigation you will clear me of all allegations."

Included with her narrative is a letter from the DON (**Exhibit C**), written on behalf of the respondent. It notes that the respondent has been employed by their facility since April 2002 and they are very pleased with her work. The respondent is described as always going the extra mile, liked by the residents, a self-starter and always assuming the charge position of her residents without fail. The DON claims the respondent always uses the five rights when passing out medications and she has never had a complaint about her performance or ability to pass medications and "upon MAR audits her medications are signed out as ordered." The DON states she considers the respondent an asset to her nurses.

A statement from the Nurse Manager is also included (**Exhibit C**) and she states that she has witnessed and walked along with the respondent during her 5 o'clock medication pass and has from time to time come in during her 9 p.m. pass and has observed her giving meds at that time. She believes the nurse who reported the respondent may be doing so in retaliation, as the respondent recently reported a nurse for not giving Coumadin as ordered and may be the same nurse.

A statement (**Exhibit C**) from the daughter of a resident at Colonial Oaks describes the respondent as "a very competent employee," very dependable and friendly and claims she distributes "her medicine every day at the same time and makes sure each resident she administers takes their pills."

Another supportive statement (**Exhibit C**) from an LPN is included and he states he has worked with the respondent since August 2002, including several orientation days, and has never witnessed the respondent administering medication at incorrect times. He describes her as highly professional and a major asset to the facility and claims she maintains strong relationships with the residents and family members.

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The final letter (**Exhibit C**) on behalf of the respondent is from the ADON. She states that she "can verify that Ms. Collins is a very dedicated employee and is very conscientious in her duties as a nurse here at our facility. Her qualities include leadership capabilities, compassion, and the ability to perform basic nursing duties. The state surveyors as well as our nurse manager have audited her for discrepancies and it was determined on both occasions that Ms. Collins had Zero deficiencies." She, too, claims that the respondent uses the five rights when passing meds and that she has never received a complaint regarding her ability to administer medication or her failure to do so by omitting meds or passing them at wrong times. She concludes by stating she considers the respondent very competent in her duties as a nurse.

On June 3, 2003 the Board received another anonymous letter (**Exhibit D**), via fax, with the header "Providence Network Colonial Oaks", from a concerned family member of a resident at Colonial Oaks. The writer states that she is beginning to fear for her family member's safety, because she has witnessed on many occasions highly unnecessary behavior by "Thea" (cover letter notes that "Thea" is the respondent) and her concerns expressed to several department heads have gone unheard or ignored. When the writer claims she spoke with the "Director about my concerns her exact words consisted of "she is a good nurse" "she just comes across like that" and she proceeded to laugh and walk away from me." The writer alleges she walked into her family member's room on more than one occasion and heard the respondent say, "better take these you stupid ass" "Don't be a pain in my ass, take these for me". She claims the nurse was unaware of her presence. She also claims to have heard the respondent say, as she left the room, "that mother f***** is going to question my mother f*****ing black ass." The writer spoke to other family members she has gotten to know and trust and they expressed the same concern, at least five of whom stated they would move their family members as well if things got worse. The writer continues, "I have been in the back dining room assisting my family member to eat, only to listen to her "yell and curse" She has screamed and had several employees in tears with her comments. I over heard her talking about her personal sexual experiences while she's helping patients to eat. I expressed my concern to a nursing assistant. She informed me that "I can't say anything about her, I need this job"...Several other nursing assistants informed me that "she can make us or break us" "you have to get on her good side or she will screw us over." The writer's family member informed her that she is scared to live there and asked "why does that nurse hate me" and claimed the nurse called her ugly. The family member also alleged that the respondent fails to give her pain medicine when asked for and when the writer spoke to the nurse about pain management and asked her to give her family member something, she claims the respondent told her she gave her one around 4 pm. The writer states this was not possible because she was outside on the patio with her family member from 3:15 til 5:15 and at no point was pain medication given. The writer concludes by stressing that the issues can no longer be ignored and since the DON refuses to listen, she feels she has nobody else to address the issues with. She states her family member is afraid of the respondent now and will not reveal her family member's name because when she told her she would report the respondent, she started crying.

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On June 11, 2003 the Board sent the respondent a letter (**Exhibit E**) informing her of the letter received and asking for a narrative response within 10 days. Her response (**Exhibit F**) was received on June 24, 2003. She states that on 5/29/03 the DON brought to her attention that an anonymous complaint had been filed against her with the corporate office. Prior to the allegations, she claims the DON had asked her to perform Assistant Director of Nurses duties and there were some employees who may have been upset by this. It was after this that "allegations of misconduct were anonymously reported to the corporate office" and she claims none were reported to the DON or the Administrator. She states she had been employed at Colonial Oaks Living Center for thirteen months without a complaint. On 6/3/03 she learned the details of the complaint and denied them "then and continue to deny today. I did not and would not intentionally commit an act that would adversely affect the physical or psychosocial welfare of any patient or resident."

She also included two letters (**Exhibit F**) of reference from family members of residents at Colonial Oaks, both indicating that while she was employed there she was "extremely helpful," "an asset," "attentive," and has a "magnetic personality." Also included is a letter of reference (**Exhibit F**) apparently to an agency the respondent has now applied for a position with. Based on the details in the other letters as well, it appeared the respondent was no longer employed at Colonial Oaks.

Also on June 11, 2003 the Board sent Colonial Oaks a letter (**Exhibit G**) requesting information on any and all counselings or warnings and incident reports regarding the respondent.

On July 16, 2003 the Board received a fax from Colonial Oaks (**Exhibit H**) which supported the indication in the above mentioned letters that the respondent was no longer working at Colonial Oaks. On 6/10/03 the respondent was terminated for "verbal abuse and employee intimidation." The termination was the result of the anonymous report by the family member who witnessed the respondent verbally abusing her relative and the description of the incident quotes from the same letter detailed above. On a disciplinary action report, also included, dated 6/3/03, it is noted that a "family member witnessed employee cursing at resident using demeaning and derogatory statements. Documented evidence from several witnesses stating that nurse is verbally abusive to residence and employees. Documented evidence that staff is frightened of nurse stating she yells and curses at them and said nurse will make it very hard on you if she doesn't like you."

On December 16, 2003, the respondent appeared for the scheduled hearing (see in testimony). Additional information requested was also received and reviewed after the hearing (**Exhibit I**).

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CONCLUSIONS OF LAW

Based on the findings, the Board makes the following Conclusion of Law:

1. The Board has jurisdiction over the parties hereto and the subject matter hereof.
2. Based on the above findings, the respondent is in violation of the Louisiana Revised Statute, Title 37, Chapter 11 Nurses, Part II Practical Nurses, Section 969 A.(4)(f) is guilty of unprofessional conduct and the Louisiana Administrative Code, Title 46, Part XLVII. Nurses, Subpart 1, Practical Nurses, Section 306, T.8.a. failure to practice practical nursing in accordance with the standards normally expected; b. failure to utilize appropriate judgement in administering nursing practice; j. intentionally committing any act that adversely affects the physical or psychosocial welfare of the patient.

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ORDER

NOW THEREFORE, IT IS ORDERED that the license of the respondent, Theodise Collins, license #940827, be placed on probation for a minimum period of 2 years with the following stipulations:

PROBATION STIPULATIONS

- A. That the respondent submit evidence of completion of courses in each of the following areas: ethics, anger management, and nursing legalities within 60 days of receipt of this Order.
- B. That the respondent be fined \$500.00^{pk} for the violations detailed in the Conclusions of Law payable within 90 days of receipt of this notice or in increments acceptable to the Board.
- C. That a hearing assessment fee of \$500.00^{pk} be submitted to the Board within 90 days of receipt of this notice or in increments acceptable to the Board.

1) **PROBATION MONITORING FEE**: that licensee is to submit a \$250.00^{pd.} probation monitoring fee, prior to issuance of probationary license.

2) **PROBATIONARY LICENSE**: practical nursing license will be on probationary status for at least **2 years** to run concurrent with employment as a Licensed Practical Nurse. License must be stamped **PROBATION**. Licensee must be employed a minimum of 10 days per month to be considered employed as a Licensed Practical Nurse.

3) **NOTIFICATION OF CHANGES**: shall notify the Board in writing **immediately** (within 5 days) of any change in name, address, telephone number or employment. Licensee must provide the Board immediately with current address and telephone number.

4) **DIRECT SUPERVISION**: will provide patient care only under direct supervision of a nurse, (RN or LPN), or physician.

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- 5) **EMPLOYER REPORTS:** upon obtaining employment as a Licensed Practical Nurse, licensee must request employer to submit a letter of hire **within 5 days of hire date**. If licensee is already employed at a facility at time of signature of agreement employer is to submit the enclosed form indicating facility is aware of probation and will agree to monitor respondent while on probation. Employer must submit evaluative reports quarterly. If unemployed or not employed as an LPN, the respondent must send a letter to the Board **monthly** stating the respondent's current employment status. Reports are due on or before the 10th day of January, April, July and October of each year.
- 6) **PROHIBITED PRACTICE:** prohibited from working in temporary staffing or any other unsupervised setting such as staffing/agency/pool or home health setting.
- 7) **INFORM EMPLOYER:** must provide a copy of this Order to each employer immediately.
- 8) **NEW REPORTS:** that receipt of any new verifiable reports of any violation(s) of the Nurse Practice Act will result in his license being immediately suspended for 2 years without an appearance before the Board.
- 9) **VIOLATIONS:** failure to comply with Order may result in the following: a) indefinite suspension of license, b) ineligibility for annual renewal of license, c) additional fines, cost and penalties up to \$500.00 per occurrence, d) increased probationary period if applicable, e) summary suspension and/or f) revocation.

Rendered this 13th day of March, 2004 and signed this 18th day of March, 2004 at Metairie, Louisiana.



ANN LAWS, RN
CHAIRMAN OF THE BOARD



CLAIRE GLAVIANO, RN, BSN, MN
EXECUTIVE DIRECTOR